v												
							Application or Docket Number					
	PATENT AP	ID	9 09/602,576									
CLAIMS AS FILED - PART I (Column 1) (Column 2)							PE [OR	OTHER 1 SMALL E		
FOR	3		NUMBER FILED NUMBER EXTRA			R	TE	FEE	Γ	RATE	FEE	
BASIC FEE		765 T					376	345.00	OR		690.00	
TOTAL CLAIMS		7	2/ minus 20= · //				#4. 43 5 9=	99	OR	X\$18=		
INDEPENDENT CLAIMS		IMS /	minus 3	= ' 6		-	39=	78		X78=		
MULTIPLE DEPENDENT CLAIM PRESENT						<u> </u>		18	OR			
		+1	30=		OR	+260=						
• If t	the difference in	TC	TAL	592	OR	TOTAL						
CLAIMS AS AMENDED - PART II									OR	OTHER SMALL E		
L.,	THE OF THE PERSON NAMED OF THE	(Column 1) (Column 2) (Column 3)					TALL	ADDI-	OH [SHALL E	ADDI-	
4		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	R	ATE	TIONAL		RATE	TIONAL	
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烹	Total	• 36	Minus	<u>" </u>	= // = //	<u> </u>	\$ 9=		OR	X\$18=	224	
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\vdash	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						130≔		OR	+260=		
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M	0-12-05 (Column 1) (Column 2) (Column 3)						IT. FEE	L		ADDIT. FEE		
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						Ľ	130=	<u></u>	OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE												
***If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
1				•	•				_			

FORM PTO-675 (Res. 12/99)

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